



CANNON BUILDING
861 SILVER LAKE BLVD., SUITE 203
DOVER, DELAWARE 19904-2467

STATE OF DELAWARE
REAL ESTATE COMMISSION

TELEPHONE: (302) 744-4500
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APPLICATION FOR REAL ESTATE BROKER OR ASSOCIATE BROKER LICENSURE INSTRUCTION SHEET

General Information

- The application asks whether you are applying for licensure as a Broker or an Associate Broker.
 - A **Broker** is primarily responsible for the day-to-day management and supervision of a brokerage organization [24 Del. C. § 2907\(d\)](#). This is commonly referred to as a "broker of record."
 - An **Associate Broker** does **not** have primary responsibility for day-to-day management and supervision of a brokerage organization.
- File this application **after** you have passed the broker examination. For information on the examination, see the [Pearson VUE](#) website (testing service).
- To be licensed as either a Broker or an Associate Broker, you must have been **actively licensed** as a salesperson and/or broker in Delaware, any other jurisdiction or combination of jurisdictions for **five continuous years** immediately before filing this application.
- To be licensed as a Broker, you must have been **actively practicing** real estate, as either a licensed salesperson or broker, for **three years** immediately before filing this application.
- The application also asks you whether you are applying by examination or reciprocity.
 - Select reciprocity if you hold a **current, active broker license** in another jurisdiction (state, the District of Columbia or U.S. territory).
 - Select examination if you do **not** hold a current, active broker license in another jurisdiction.

Requirements for All Applicants

The following are required regardless of whether you are applying as a Broker or Associate Broker and whether by examination or reciprocity.

- ☐ Submit a completed, signed and notarized [Application for Real Estate Broker or Associate Broker Licensure](#).
- ☐ Enclose the non-refundable Broker [processing fee](#) **plus** \$25 Guaranty Fund fee ([24 Del. C. §2922](#)) by check or money order made payable to "State of Delaware".
 - The Guaranty Fund fee is **not** required if you already paid it when you obtained a Delaware Salesperson license.
- ☐ If your name on any document you submit differs from your name on the application form, submit a copy of legal document showing name change (e.g., marriage license, divorce decree, etc.).
- ☐ Arrange for the Commission office to receive a Certificate of Licensure History to be sent **directly** to the Commission office from **each** jurisdiction (state, U.S. territory or District of Columbia) where you have ever held any kind of real estate license.
 - The Certificate(s) must be dated within 30 days of the application.
 - The Certificate(s) must show that you meet the licensure requirements listed in **General Information** above.
- ☐ Submit a completed, signed [Sales or Lease Transaction Listing](#) form(s) listing 30 sales or lease transactions that you completed during the five years immediately before your application. Follow the instructions on the form.

Note: Time share and property management transactions are **not** considered as eligible sales or lease transactions.

- ☐ If applying as a Broker, use this table to decide what documentation of your office responsibility is required:

IF the office for which you will be responsible is a(n)...	THEN...
new Delaware office	submit an Application for Real Estate Office Permit . See also Real Estate Office .
established Delaware office	submit a letter signed by the current Broker naming you as the replacement Broker for the office. If you are unable to obtain a letter from the current Broker, submit a letter of explanation.
new or established office in another jurisdiction	no additional documentation is required. However, your Certificate of Licensure History must show the name of the office connected to your current license in another jurisdiction.

- ☐ If you have never been issued a U.S. Social Security Number (SSN), submit a [Request for Exemption from Social Security Number Requirement](#).
The Privacy Act of 1974, Section 7, requires the following information to be given to all applicants: Applicants for any Delaware professional or occupational license, permit, registration or certificate (other than Gaming permits) are required to provide a U.S. SSN (29 Del. C. §8735(m)). The Division of Professional Regulation uses the SSN primarily to verify identity and safeguard personal information. It may also be used to enforce child support obligation (13 Del. C. §2216) and for other lawful purposes.

Additional Requirements for Applicants by Examination

If you are applying by examination, you must submit the following *in addition to* the items listed in **Requirements for All Applicants** section above.

- ☐ Submit a copy of the certificate that you received when you completed the 99-hour Delaware broker's pre-licensing course.
- ☐ Submit the original score report that you received from [Pearson VUE](#) when you passed the general and Delaware law portions of the broker's examination.

Additional Requirement for Applicants for a Reciprocal License

If you are applying for a reciprocal license, you must provide the following *in addition to* the items listed in **Requirements for All Applicants** section above:

- ☐ Submit the original score report that you received from [Pearson VUE](#) when you passed the Delaware law portion of the broker's examination.



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APPLICATION FOR REAL ESTATE ASSOCIATE BROKER OR BROKER LICENSURE

TYPE OF APPLICATION

1. Check the type of license you are applying for:

- ☐ Associate Broker – I am **not** responsible for day-to-day management and supervision of a brokerage organization.
- ☐ Broker – I am primarily responsible for the day-to-day management and supervision of a brokerage organization. Check the statement that applies to you:
- ☐ New Delaware Office – I will be responsible for a new real estate office located in Delaware. **Submit an Application for Real Estate Office Permit for the office.**
- ☐ Established Delaware Office - I will be responsible for an established real estate office located in Delaware. Enter the office's Delaware permit number: R ____ - _____. **Submit a letter from the office's current Broker naming you as the replacement Broker or a letter explaining why you cannot obtain a letter from the current Broker.**
- ☐ Office in Other Jurisdiction – I am responsible for a real estate office located outside Delaware.

2. Select type of application you are filing (check one):

- ☐ **Examination** – I do **not** hold a current, active broker license in another jurisdiction (state, U.S. territory or District of Columbia).
- ☐ **Reciprocity** – I hold a **current, active** broker license in another jurisdiction.

IDENTIFYING AND CONTACT INFORMATION – All applicants complete this section.

3. Full Name: _____
Last/Family First Middle
4. Other Names Used: ☐ None _____
(Include maiden, prior married, alternate spellings)
5. Date of Birth (month/day/year): _____ Gender: ☐ Male ☐ Female
6. Have you been issued a U.S. Social Security Number? Yes ☐ No ☐ If yes, enter your SSN: _____
If no, you must file a [Request for Exemption from Social Security Number Requirement](#).
7. **Personal** Mailing Address: _____
We will mail correspondence other than your license to this address.

City State Zip
8. Phone: _____ Email: _____ ☐ None
daytime evening or cell

INFORMATION ABOUT OFFICE – All applicants complete this section.

9. Enter the following information about the real estate office where you will be employed:

Business Name: _____

Office Address: _____
We will mail your license to this address and all other correspondence to your personal mailing or email address.

City State Zip

10. Are you responsible for the day-to-day management and supervision, as required by [24 Del. C. § 2907\(d\)](#), of the office named above? Yes ☐ No ☐

- **If yes, continue with the next question.**
- **If no, arrange for the broker of record for the above office to complete and sign the following statement. Then, applicants by examination skip to the REAL ESTATE EDUCATION AND EXAMINATION section and applicants by reciprocity skip to the DELAWARE LAW EXAMINATION section.**

STATEMENT OF BROKER OF RECORD

Print Broker of Record Name: _____

Delaware Real Estate License: **RB-** _____

I affirm that the applicant named above will be affiliated with my office as a real estate associate broker upon issuance of his or her license.

BROKER OF RECORD SIGNATURE: _____ Date: _____

11. Have you **actively practiced** real estate, as either a licensed salesperson or broker, for at least **three years** immediately before filing this application? Yes ☐ No ☐
12. Have you complied and will you continue to comply with the escrow account provisions as required by [24 Del. C. §2923\(a\)](#) and in Section 6.0 of the Commission's [Rules and Regulations](#)? Yes ☐ No ☐

REAL ESTATE EDUCATION AND EXAMINATION – Only applicants by examination complete this section.

13. Enter the following information about the real estate school you attended:

Name: _____ Completion Date: _____

14. Have you completed the Delaware broker's pre-licensing course? Yes ☐ No ☐

Submit a copy of the certificate that you received when you completed the pre-licensing course.

15. Have you passed the broker's examination? Yes ☐ No ☐ If yes, enter date passed: _____
month/day/year

Submit the original score report that you received from Pearson VUE showing you passed both general and Delaware law portions. Skip to the LICENSURE AND PRACTICE HISTORY section.

DELAWARE LAW EXAMINATION – Only applicants by reciprocity complete this section.

16. Have you passed the Delaware law portion of the broker's examination? Yes ☐ No ☐ **If yes, enter date passed:**

month/day/year

Submit the original score report received from Pearson VUE showing you passed the Delaware law portion.

LICENSURE AND PRACTICE HISTORY – All applicants complete this section.

17. Have you ever held a license to practice real estate in another jurisdiction? Yes ☐ No ☐ If yes, list all jurisdictions where you have ever held a license:

JURISDICTION	LICENSE NUMBER	IS THIS LICENSE <i>CURRENT</i> ?
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>

- Arrange for a Certificate of Licensure History to be sent *directly* to the Commission office from *each* jurisdiction listed above. The certificate(s) must show *five continuous years* of licensure immediately before filing this application.
- Submit a completed, signed [Sales or Lease Transaction Listing](#) form(s) listing 30 sales or lease transactions that you completed during the five years immediately before your application. Follow the instructions on the form.

DISCLOSURES – All applicants complete this section.

18. Have you ever been convicted of or entered a plea of guilty or *nolo contendere* (no contest) to any felony, misdemeanor or other criminal offense, including any offense for which you have received a pardon, in any jurisdiction? Yes ☐ No ☐ **If yes, submit a complete explanation and a certified copy of your criminal history record from any jurisdiction in which you have been convicted or pardoned. For information on obtaining a Delaware criminal history record, see [State Bureau Of Identification](#).**
19. Are any criminal charges pending against you? Yes ☐ No ☐ **If yes, enclose a complete explanation and any documentation related to the charges. The information should be in sufficient specificity to enable the Commission to make a determination whether the charge is substantially related to the practice of real estate.**
20. Have you received any administrative penalties (disciplines), including but not limited to fines, formal reprimands, license suspension or revocation, and probationary limitations? Yes ☐ No ☐ **If yes, arrange for the jurisdictions to send information about the disciplinary action directly to the Commission office.**
21. Have you entered into a consent agreement that places conditions on your professional conduct or practice, including any voluntary surrender of license? Yes ☐ No ☐ **f yes, arrange for the jurisdictions to send information about the disciplinary action directly to the Commission office.**
22. Are any disciplinary proceedings or unresolved complaints concerning your practice of real estate pending against you at present? Yes ☐ No ☐ **If yes, arrange for the jurisdictions to send information about the disciplinary action directly to the Commission office.**
23. Do you have any impairment related to drugs or alcohol that would limit your ability to undertake the practice of real estate in a manner consistent with the safety of a patient or the public? Yes ☐ No ☐ **If yes, submit a letter explaining fully. Include copies of all appropriate records.**

If your application requires Commission review, the Commission office must receive all of these items no later than 4:30 PM ten full working days before the Commission's meeting date:

- Completed, signed and notarized application form
- Fee payment
- All required supporting documentation.

Applications that are not complete within 12 months of filing may be considered abandoned and discarded. When your application is complete, please allow 4-6 weeks to receive your license.

AFFIDAVIT

I certify that the information in this application is complete and true. I understand that the intentional inclusion of false or fraudulent information in this application, or the material omission of information which might have a bearing on licensure, may result in the denial of licensure and will be reported to the Attorney General for further action.

If I am applying for licensure in an office located outside of Delaware, I give irrevocable consent that legal action may be commenced against me in the proper court of any county of the State of Delaware as required by Chapter 29, Title 24, Section 2909 of *The Delaware Code*.

Signature of Applicant: _____ Date: _____

City of _____ County of _____

Sworn to before me and subscribed in my presence this _____ day of _____, 2____.

Notary Signature: _____

SEAL

My commission expires: _____

***APPLICATIONS THAT ARE UNSIGNED, NOT NOTARIZED, INCOMPLETE OR NOT ACCOMPANIED BY THE
REQUIRED FEE WILL BE REJECTED.***



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SALES OR LEASE TRANSACTION LISTING INSTRUCTION SHEET

When to Submit

Submit a completed, signed [Sales or Lease Transactions Listing](#) form in the following situations:

- You are applying for a **reciprocal** Salesperson license based on three years of continuous licensure. List at least 20 sales or lease transactions that you completed during the three years immediately before your application.
- You are applying for a Broker or Associate Broker license. List at least 30 sales or lease transactions that you completed during the five years immediately before your application.

Note: Time share and property management transactions are *not* considered as eligible sales or lease transactions.

Procedure

1. Complete a separate [Sales or Lease Transactions Listing](#) for each Broker who supervised transactions. You may need more than one page to list all transactions supervised by the same Broker. Do not mix transactions supervised by different Brokers on the same page.
2. On **each** page, enter the following:
 - Your name as the Salesperson, Broker or Associate Broker applicant
 - Name of the *supervising* Broker for all transactions listed on the page
 - *Supervising* Broker's license number
 - Page number (e.g., 1 of 1, 2 of 3)
3. For **each** transaction you list, enter all of the following:
 - Transaction # - assign #1 through #20 for Salesperson applications and #1 through #30 for Broker/Associate Broker applications
 - Property address, including the **city, state and zip code**
 - Sale or lease completion date
 - Purchaser/lessee name
 - Seller/lessor name
 - Check YES if you *personally* completed the sale or lease. Check NO if a subordinate (that is, an agent you directly supervised) completed it.
4. You and the supervising Broker must sign the form. If you complete more than one page for the same Broker, you and the supervising Broker must sign each page.



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SALES OR LEASE TRANSACTION LISTING

Applicant Name:			Page # ____ of ____ for this supervising Broker		
Supervising Broker Name:					
Supervising Broker License #:					
#	Property Address City, State, Zip	Sale or Lease Completion Date (month/day/year)	Purchaser/Lessee Name	Seller/Lessor Name	Personally Completed?
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO
					<input type="checkbox"/> YES <input type="checkbox"/> NO

Applicant Signature: _____

Date: _____

Supervising Broker Signature: _____

Date: _____